

460-3041

**PLUMBING APPLICATION**Maine Dept. Health & Human Services  
Div of Environmental Health, 11 SHS  
(207) 287-5672 Fax: (207) 287-4172**PROPERTY ADDRESS**City, Town,  
or Plantation

LAMOINE

Street or Road

318 PARADISE Cove RD

Subdivision, Lot #

**PROPERTY OWNERS NAME**

Name (last, first, MI)

Alicia Jewell

☒ Owner  
☐ ApplicantMailing Address  
of  
Owner/Applicant

Michaels Plumbing

Daytime Tel. #

**OWNER OR APPLICANT STATEMENT**

I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.

Signature of Owner or Applicant

Date

10/19/11

&gt;&gt; CAUTION: LPI APPROVAL REQUIRED &lt;&lt;

LAMOINE

Date  
Permit  
Issued:

10/22/11

PERMIT # 1672 TOWN COPY

\$ 14.00

☐ If Double Fee  
FEE Charged

L.P.I. # 1011

Local Plumbing Inspector Signature

The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Internal Plumbing Rules.

**CAUTION: INSPECTION REQUIRED**

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature

Date Approved (Rough-In)

Date Approved (Final)

**PERMIT INFORMATION****This Application Is For**

- ☒ NEW PLUMBING INSTALLATION
- ☐ RELOCATED PLUMBING

**Type of Structure To Be Served**

- ☐ SINGLE FAMILY DWELLING
- ☒ MODULAR OR MOBILE HOME
- ☐ MULTIPLE FAMILY DWELLING
- ☐ OTHER-SPECIFY \_\_\_\_\_

**Plumbing To Be Installed By**

- ☒ MASTER PLUMBER
- ☐ MFG'D HOUSING DEALER/MECHANIC
- ☐ PUBLIC UTILITY EMPLOYEE
- ☐ PROPERTY OWNER

LICENSE # 19151871

**Hook-Up & Piping Relocation  
Maximum of 1 Hook-Up**

HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District

**OR**

HOOK UP: to an existing subsurface wastewater disposal system

PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures

**OR**TRANSFER FEE  
(\$6.00)**Column 2  
Type of Fixture**

Number

2	Hosebibb / Silcock
	Floor Drain
	Urinal
	Drinking Fountain
	Indirect Waste
	Waste Treatment Softener, Filter, etc.
	Grease / Oil Separator
	Dental Cuspidor
	Bidet
	Other: _____
	Fixtures (Subtotal) Column 2

**Column 1  
Type of Fixture**

Number

	Bathtub (and Shower)
	Shower (Separate)
	Sink
	Wash Basin
	Water Closet (Toilet)
	Clothes Washer
	Dish Washer
	Garbage Disposal
1	Laundry Tub
	Water Heater
	Fixtures (Subtotal) Column 1

Fixtures (Subtotal)  
Column 1Fixtures (Subtotal)  
Column 2

Total Fixtures

Fixture Fee

Transfer Fee

Hook-Up &amp; Relocation Fee

Permit Fee

(Total)

48.00